

Fill in this information to identify your case and this filing:

Debtor 1 James C. Sommar
 First Name Middle Name Last Name

Debtor 2 Christine M. Sommar
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-10850-mdc

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1. 20 Lincoln Ave.
 Street address, if available, or other description

Lansdale PA 19446
 City State ZIP Code

Montgomery County
 County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☒ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Owned as tenant in common with brother. Liquidation Analysis: \$228,000.00 less \$22,800.00 Costs of Sale, less \$9,972.00 Property Tax lien = \$195,228.00/2 = \$97,614.00

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property? \$228,000.00
 Current value of the portion you own? \$97,614.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
 Other _____

☐ Check if this is community property

If you own or have more than one, list here:

1.2. 210 S. Broad St.
 Street address, if available, or other description

Lansdale PA 19446
 City State ZIP Code

Montgomery County
 County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☒ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Owned as tenant in common with brother. Liquidation Analysis: \$315,000.00 less \$31,500.00 Costs of Sale less \$30,540.21 Mortgage & Tax liens = \$252,959.79/2 = \$126,479.89 less \$14,762.00 Exemption = \$111,717.89

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property? \$315,000.00
 Current value of the portion you own? \$111,717.89

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
 Other _____

☐ Check if this is community property (see instructions)

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

1.3

753 W. Prospect Ave.
Street address, if available, or other description

North Wales PA 19454
City State ZIP Code

Montgomery County
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Liquidation Analysis: \$500,000 less \$50,000 Sale Costs less \$414,462 Mortgages less \$35,538 exemption = \$0 Non-Exempt Equity

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$500,000.00
Current value of the portion you own? \$500,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Tenancy by the Entireties

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. →

\$ 709,331.89

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make: Honda
Model: Accord
Year: 2005
Approximate mileage: 120000

Other information:

Condition: Fair

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$1,365.00
Current value of the portion you own? \$1,365.00

If you own or have more than one, describe here:

3.2. Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$
Current value of the portion you own? \$

Debtor 1

James C. Sommar

First Name

Middle Name

Last Name

Case number (if known)

20-10850-mdc

Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Make: _____
Model: _____
Year: _____
Approximate mileage: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make: _____
Model: _____
Year: _____
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ 1,365.00

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

Outdoor Furniture/Grill, Lawn Mower/Yard Equipment, Additional Bedroom Furniture, Master Bedroom Furniture, Family Room Furniture, Kitchen Table and Chairs, small appliances and kitchen items, Dining Room Furniture, Living Room Furniture, Two Tables, Sofa, Two Chairs, Chest, Cabinet, Clock

\$ 1,625.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

Laptop computer, TV's (2), DVD Player

\$ 100.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

\$ 0.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

Golf Clubs

\$ 25.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

\$ 0.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Clothing

\$ 25.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Jewelry

\$ 100.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

\$ 0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

\$ 0.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →

\$ 1,875.00

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?Do not deduct secured claims
or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes Cash: \$ 540.00**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes Institution name:

17.1. Checking account:	PNC Bank (Debtor joint with Brother)	\$ 190.00
17.2. Checking account:	Key Bank (Co-Debtor Only)	\$ 1,805.00
17.3. Savings account:		\$
17.4. Savings account:		\$
17.5. Certificates of deposit:		\$
17.6. Other financial account:	Wells Fargo	\$ 60.00
17.7. Other financial account:		\$
17.8. Other financial account:		\$
17.9. Other financial account:		\$

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No☒ Yes. Give specific
information about
them.

Name of entity:	% of ownership:	
Sommar Tracy & Sommar law partnership - See Attachment	50 %	\$ 0.00
Sommar Tracy & Sommar real estate partnership - See Attachment	50 %	\$ 25,500.00
_____	%	\$ _____

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them.

Issuer name:

_____\$ _____
 _____\$ _____
 _____\$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☐ No
☒ Yes. List each account separately. Institution name:
 Type of account:

401(k) or similar plan: Raymond James 401k (Debtor) \$ 43.04
 Pension plan: Pension (Co-Debtor) \$ Unknown
 IRA: _____\$ _____
 Retirement account: _____\$ _____
 Keogh: _____\$ _____
 Additional account: _____\$ _____
 Additional account: _____\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes..... Institution name or individual:

Electric: _____\$ _____
 Gas: _____\$ _____
 Heating oil: _____\$ _____
 Rental unit: _____\$ _____
 Prepaid rent: _____\$ _____
 Telephone: _____\$ _____
 Water: _____\$ _____
 Rented furniture: _____\$ _____
 Other: _____\$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes..... Issuer name and description:

_____\$ _____
 _____\$ _____
 _____\$ _____

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____\$
_____\$
_____\$

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them. ...

\$ 0.00

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$ 0.00
State: \$ 0.00
Local: \$ 0.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.

Alimony: \$ 0.00
Maintenance: \$ 0.00
Support: \$ 0.00
Divorce settlement: \$ 0.00
Property settlement: \$ 0.00

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.

\$ 0.00

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

Banner Life (Death Benefit:\$400,000)

Spouse

\$ 0.00

\$

\$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☐ No

☒ Yes. Give specific information.

Unclaimed Property from Parent's Estate (Debtor)

\$ 1,400.00

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.

\$ 0.00

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.

\$ 0.00

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information.

\$ 0.00

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

\$ 29,538.04

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

☒ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

☐ No

☒ Yes. Describe.

Edward G. Murphy III - See Attachment

\$ 0.00

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No

☐ Yes. Describe.

\$ 0.00

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No
☐ Yes. Describe..... \$ 0.00

41. Inventory

☒ No
☐ Yes. Describe..... \$ 0.00

42. Interests in partnerships or joint ventures

☐ No
☒ Yes. Describe..... Name of entity: % of ownership:
Sommar Tracy & Sommar law partnership - See Attachment 50 % \$ 0.00
Sommar Tracy & Sommar real estate partnership - See Attachment 50 % \$ 25,500.00
% \$

43. Customer lists, mailing lists, or other compilations

☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe..... \$ 0.00

44. Any business-related property you did not already list

☒ No
☐ Yes. Give specific information \$
\$
\$
\$
\$
\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here → \$ 25,500.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No
☐ Yes..... \$

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

48. Crops—either growing or harvested

☐ No
☐ Yes. Give specific information. \$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☐ No
☐ Yes. \$

50. Farm and fishing supplies, chemicals, and feed

☐ No
☐ Yes. \$

51. Any farm- and commercial fishing-related property you did not already list

☐ No
☐ Yes. Give specific information. \$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....	→	\$ 709,331.89
56. Part 2: Total vehicles, line 5.....	\$ 1,365.00	
57. Part 3: Total personal and household items, line 15.....	\$ 1,875.00	
58. Part 4: Total financial assets, line 36.....	\$ 29,538.04	
59. Part 5: Total business-related property, line 45.....	\$ 25,500.00	
60. Part 6: Total farm- and fishing-related property, line 52.....	\$ 0.00	
61. Part 7: Total other property not listed, line 54.....	+ \$ 0.00	
62. Total personal property. Add lines 56 through 61.....	\$ 58,278.04	Copy personal property total → + \$ 58,278.04
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		\$ 767,609.93

Attachment to Schedule A/B

A/B Line 19 – Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture:

- a. Sommar Tracy & Sommar (Debtor)(Law partnership which owns office equipment, aged A/R of nominal value)
- b. Sommar Tracy & Sommar Real Estate Partnership (Debtor)(owns 20 Lincoln Ave. (Rear), Lansdale, PA 19446)

A/B Line 38 – Accounts receivable or commissions you already earned:

Amount Due from Edward G. Murphy III (the Parties previously agreed to credit \$27,068.54 towards any amounts due from Debtor(s) to Plan, Estate and Individual (See Sch. F); to the extent that the creditor(s) dispute the application of said credit and upon order of the Bankruptcy Court stating that the Debtor(s) are not entitled to such a credit, the full amount plus applicable interest shall be considered the Debtor(s)' receivable and this Schedule shall be amended to reflect the same.)

A/B Line 42 – Interests in partnerships or joint ventures:

- a. Sommar Tracy & Sommar (Debtor)(Law partnership which owns office equipment, aged A/R of nominal value)
- b. Sommar Tracy & Sommar Real Estate Partnership (Debtor)(owns 20 Lincoln Ave. (Rear), Lansdale, PA 19446)

Fill in this information to identify your case:

Debtor 1	James C. Sommar		
	First Name	Middle Name	Last Name
Debtor 2	Christine M. Sommar		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania			
Case number (If known)	20-10850-mdc		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
210 S. Broad St. Brief description:	\$ 111,717.89	<input checked="" type="checkbox"/> \$ 14,762.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Line from <i>Schedule A/B</i> : 1.2 753 W. Prospect Ave. Brief description:	\$ 500,000.00	<input checked="" type="checkbox"/> \$ 35,538.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(1)
Line from <i>Schedule A/B</i> : 1.3 2005 Honda Accord Brief description:	\$ 1,365.00	<input checked="" type="checkbox"/> \$ 1,365.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(2)
Line from <i>Schedule A/B</i> : 3.1			

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor James C. Sommar Case number (if known) 20-10850-mdc
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Household goods - Outdoor Furniture/Grill Brief description: Line from Schedule A/B: 6	\$25.00	<input checked="" type="checkbox"/> \$ 25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Lawn Mower/Yard Equipment Brief description: Line from Schedule A/B: 6	\$25.00	<input checked="" type="checkbox"/> \$ 25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Additional Bedroom Furniture Brief description: Line from Schedule A/B: 6	\$75.00	<input checked="" type="checkbox"/> \$ 75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Master Bedroom Furniture Brief description: Line from Schedule A/B: 6	\$75.00	<input checked="" type="checkbox"/> \$ 75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Family Room Furniture Brief description: Line from Schedule A/B: 6	\$75.00	<input checked="" type="checkbox"/> \$ 75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Kitchen Table and Chairs, small appliances and kitchen items Brief description: Line from Schedule A/B: 6	\$50.00	<input checked="" type="checkbox"/> \$ 50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Dining Room Furniture Brief description: Line from Schedule A/B: 6	\$400.00	<input checked="" type="checkbox"/> \$ 400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Living Room Furniture Brief description: Line from Schedule A/B: 6	\$600.00	<input checked="" type="checkbox"/> \$ 600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Two Tables, Sofa, Two Chairs Brief description: Line from Schedule A/B: 6	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household goods - Chest, Cabinet, Clock Brief description: Line from Schedule A/B: 6	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Electronics - Laptop computer Brief description: Line from Schedule A/B: 6	\$50.00	<input checked="" type="checkbox"/> \$ 50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Electronics - TV's (2), DVD Player Brief description: Line from Schedule A/B: 7	\$50.00	<input checked="" type="checkbox"/> \$ 50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)

Debtor James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Sports and hobby equipment - Golf Clubs Brief description: Line from Schedule A/B: 9 Clothing - Clothing	\$25.00	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Clothing - Clothing Brief description: Line from Schedule A/B: 11 Jewelry - Jewelry	\$25.00	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Jewelry - Jewelry Brief description: Line from Schedule A/B: 12 Cash on Hand (Cash On Hand)	\$100.00	<input checked="" type="checkbox"/> \$1,700.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Cash on Hand (Cash On Hand) Brief description: Line from Schedule A/B: 16 PNC Bank (Debtor joint with Brother) (Checking)	\$540.00	<input checked="" type="checkbox"/> \$540.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
PNC Bank (Debtor joint with Brother) (Checking) Brief description: Line from Schedule A/B: 17.1 Key Bank (Co-Debtor Only) (Checking)	\$190.00	<input checked="" type="checkbox"/> \$190.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Key Bank (Co-Debtor Only) (Checking) Brief description: Line from Schedule A/B: 17.2 Key Bank (Co-Debtor Only) (Checking)	\$1,805.00	<input checked="" type="checkbox"/> \$671.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Key Bank (Co-Debtor Only) (Checking) Brief description: Line from Schedule A/B: 17.2 Wells Fargo (Checking)	\$1,805.00	<input checked="" type="checkbox"/> \$1,134.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Wells Fargo (Checking) Brief description: Line from Schedule A/B: 17.6 Pension (Co-Debtor)	\$60.00	<input checked="" type="checkbox"/> \$60.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Pension (Co-Debtor) Brief description: Line from Schedule A/B: 21 Raymond James 401k (Debtor)	\$Unknown	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(10)(e)
Raymond James 401k (Debtor) Brief description: Line from Schedule A/B: 21 Unclaimed Property from Parent's Estate (Debtor) (owed to debtor)	\$43.04	<input checked="" type="checkbox"/> \$43.04 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(12)
Unclaimed Property from Parent's Estate (Debtor) (owed to debtor) Brief description: Line from Schedule A/B: 32 Edward G. Murphy III - See Attachment (owed to debtor)	\$1,400.00	<input checked="" type="checkbox"/> \$54.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Edward G. Murphy III - See Attachment (owed to debtor) Brief description: Line from Schedule A/B: 38	\$0.00	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)

Fill in this information to identify your case:

Debtor 1 James C. Sommar
 First Name Middle Name Last Name

Debtor 2 Christine M. Sommar
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-10850-mdc
 (If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.1	Montgomery County Tax Claim Bureau	Describe the property that secures the claim:	\$9,972.00	\$228,000.00	\$0.00
Creditor's Name P.O. Box 190 Number Street Norristown PA 19404 City State ZIP Code		20 Lincoln Ave., Lansdale, PA 19446 - \$228,000.00			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) Last 4 digits of account number			
2.2	Montgomery County Tax Claim Bureau	Describe the property that secures the claim:	\$15,319.00	\$315,000.00	\$0.00
Creditor's Name P.O. Box 190 Number Street Norristown PA 19404 City State ZIP Code		210 S. Broad St., Lansdale, PA 19446 - \$315,000.00			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here: \$25,291.00

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

Part 1:	Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.3	Univest National Bank & Trust Co. Describe the property that secures the claim: \$ 15,221.21 \$ 315,000.00 \$ 0.00 210 S. Broad St., Lansdale, PA 19446 - \$315,000.00 Creditor's Name 16 Harbor Place Number Street PO Box 197 Souderton PA 18964 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number _____			
2.4	Wells Fargo Bank Describe the property that secures the claim: \$ 55,694.00 \$ 500,000.00 \$ 0.00 753 W. Prospect Ave., North Wales, PA 19454 - \$500,000.00 Creditor's Name PO Box 31557 Number Street Billings MT 59107 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number _____			
2.5	Wells Fargo Home Mortgage Describe the property that secures the claim: \$ 358,768.00 \$ 500,000.00 \$ 0.00 753 W. Prospect Ave., North Wales, PA 19454 - \$500,000.00 Creditor's Name PO Box 10335 Number Street Des Moines IA 50306 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number _____			
Add the dollar value of your entries in Column A on this page. Write that number here: \$ 429,683.21 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ 454,974.21				

Fill in this information to identify your case:

Debtor 1	James C. Sommar		
	First Name	Middle Name	Last Name
Debtor 2	Christine M. Sommar		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania			
Case number (if known)	20-10850-mdc		

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
\$658.00	\$658.00	\$0.00

2.1 Berkheimer

Last 4 digits of account number

Priority Creditor's Name
PO Box 25159
Number Street

When was the debt incurred? 2018

Lehigh Valley PA 18002
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☒ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

2.2 IRS

Last 4 digits of account number

\$93,000.00 \$49,881.50 \$43,118.50

Priority Creditor's Name
Centralized Insolvency Operation
Number Street

When was the debt incurred? 2011, 2012, 2015-2018

PO Box 7346
Philadelphia PA 19101-7346
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of PRIORITY unsecured claim:

☐ Domestic support obligations

☒ Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

☐ Other. Specify

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

Yes

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
 First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim Priority amount Nonpriority amount

2.3 Pennsylvania Dept. of Revenue

Last 4 digits of account number

\$ 5,647.14 \$ 5,647.14 \$ 0.00

Priority Creditor's Name
 Bankruptcy Division

Number Street
 PO Box 280946

Harrisburg PA 17128-0946
 City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 2017-2018

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Last 4 digits of account number

\$ \$ \$

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Last 4 digits of account number

\$ \$ \$

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

American Express

Total claim

4.1 Last 4 digits of account number \$371.00

Nonpriority Creditor's Name

PO Box 981537

Number Street

El Paso TX 79998
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 04/09/2002

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Credit Card Debt

4.2 AMEX Dept. Stores Last 4 digits of account number \$3,891.00

Nonpriority Creditor's Name

PO Box 8218

Number Street

Mason OH 45040
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 5/15/2000

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Credit Card Debt

4.3 Bank of America Last 4 digits of account number \$3,290.00

Nonpriority Creditor's Name

PO Box 982238

Number Street

El Paso TX 79998
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? 01/01/1985

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Credit Card Debt

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.4	Barlcay's Bank Delaware <hr/> Nonpriority Creditor's Name PO Box 8803 <hr/> Number Street <hr/> Wilmington DE 19899 <hr/> City State ZIP Code	Last 4 digits of account number ***** When was the debt incurred? <u>11/14/2001</u>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Total claim</div> \$ <u>10,543.00</u>
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>			

4.5	Capital One Bank USA <hr/> Nonpriority Creditor's Name PO Box 30281 <hr/> Number Street <hr/> Salt Lake City UT 84130 <hr/> City State ZIP Code	Last 4 digits of account number When was the debt incurred? <u>12/20/2005</u>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Total claim</div> \$ <u>15,523.00</u>
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>			

4.6	Capital One Bank USA <hr/> Nonpriority Creditor's Name PO Bo 30281 <hr/> Number Street <hr/> Salt Lake City UT 84130 <hr/> City State ZIP Code	Last 4 digits of account number When was the debt incurred? <u>11/22/2005</u>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Total claim</div> \$ <u>2,602.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>			

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.7	<p>Edward G. Murphy III</p> <p>Nonpriority Creditor's Name 3240 Creamery Road</p> <p>Number Street</p> <p>Souderton PA 18964</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Alleged Breach of Agreement</p>	<p>\$ Unknown</p>
4.8	<p>Edward G. Murphy III as Executor of the Est. of Jeanne E. Murphy</p> <p>Nonpriority Creditor's Name 3240 Creamery Road</p> <p>Number Street</p> <p>Souderton PA 18964</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 2000</p> <p>As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan</p>	<p>\$ 20,500.00</p>
4.9	<p>EG Murphy III, Inc. Profit Sharing & Retirement Plan</p> <p>Nonpriority Creditor's Name PO Box 526</p> <p>Number Street</p> <p>Solebury PA 18963</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? 09/2006</p> <p>As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan</p>	<p>\$ 34,000.00</p>

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.10	JPMCB Card Services <hr/> Nonpriority Creditor's Name PO Box 15369 <hr/> Number Street <hr/> Wilmington DE 19850 <hr/> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? <u>08/11/2009</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 6,632.00
4.11	Sears/CBNA <hr/> Nonpriority Creditor's Name 5800 South Corporate Place <hr/> Number Street <hr/> Sioux Falls SD 57108 <hr/> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? <u>01/01/1974</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 11,668.00
4.12	USAA Savings Bank <hr/> Nonpriority Creditor's Name 10750 McDermott Pkwy <hr/> Number Street <hr/> San Antonio TX 78288 <hr/> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? <u>08/15/1999</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 20,168.00

Debtor 1

James C. Sommar

First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

EG Murphy III, Inc. Profit Sharing & Retirement Plan

Name

3240 Creamery Road

Number Street

Souderton

PA

18964

City

State

ZIP Code

Edward G. Murphy III

Name

PO Box 526

Number Street

Solebury

PA

18963

City

State

ZIP Code

Edward G. Murphy III as Executor of the Est. of Jeanne E. Murphy

Name

PO Box 526

Number Street

Solebury

PA

18963

City

State

ZIP Code

James L. Griffith, Esq.

Name

800 Sarina Terrace SW

Number Street

Vero Beach

FL

32968

City

State

ZIP Code

James L. Griffith, Esq.

Name

800 Sarina Terrace SW

Number Street

Vero Beach

FL

32968

City

State

ZIP Code

James L. Griffith, Esq.

Name

800 Sarina Terrace SW

Number Street

Vero Beach

FL

32968

City

State

ZIP Code

James L. Griffith, Esq. LLC

Name

920 Lenmar Dr.

Number Street

Blue Bell

PA

19422

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

Debtor 1 James C. Sommar Case number (if known) 20-10850-mdc
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

James L. Griffith, Esq. LLC

Name

920 Lenmar Dr.

Number Street

Blue Bell

PA

19422

City

State

ZIP Code

James L. Griffith, Esq. LLC

Name

920 Lenmar Dr.

Number Street

Blue Bell

PA

19422

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 99,305.14
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ 0.00
6e. Total. Add lines 6a through 6d.		6e. \$ 99,305.14

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 129,188.00
	6j. Total. Add lines 6f through 6i.	6j. \$ 129,188.00

Fill in this information to identify your case:

Debtor James C. Sommar
First Name Middle Name Last Name
Debtor 2 Christine M. Sommar
(Spouse If filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Eastern District of Pennsylvania
Case number 20-10850-mdc
(If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name _____
Street _____
City _____ State _____ ZIP Code _____

2.2

Name _____
Street _____
City _____ State _____ ZIP Code _____

2.3

Name _____
Street _____
City _____ State _____ ZIP Code _____

2.4

Name _____
Street _____
City _____ State _____ ZIP Code _____

2.5

Name _____
Street _____
City _____ State _____ ZIP Code _____

Fill in this information to identify your case:

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Debtor 2 Christine M. Sommar
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-10850-mdc
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No
☐ Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Kevin J. Sommar
Name
210 S. Broad St.
Street
Lansdale PA 19446
City State ZIP Code

☒ Schedule D, line 2.3
☐ Schedule E/F, line ____
☐ Schedule G, line ____

3.2 _____
Name

Street

City State ZIP Code

☐ Schedule D, line ____
☐ Schedule E/F, line ____
☐ Schedule G, line ____

3.3 _____
Name

Street

City State ZIP Code

☐ Schedule D, line ____
☐ Schedule E/F, line ____
☐ Schedule G, line ____

Fill in this information to identify your case:

Debtor 1 James C. Sommar
First Name Middle Name Last Name
 Debtor 2 Christine M. Sommar
(Spouse, if filing) First Name Middle Name Last Name
 United States Bankruptcy Court for the: Eastern District of Pennsylvania
 Case number 20-10850-mdc
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

Occupation

Attorney

Employer's name

Sommar Tracy & Sommar

Employer's address

210 S. Broad St.

Number Street

Lansdale, PA 19446

City State ZIP Code

How long employed there? 40 years

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Substitute Elementary School Te

North Penn School District

Lansdale, PA 19446

City State ZIP Code

30 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00

\$ 1,128.33

3. Estimate and list monthly overtime pay.

3. + \$ 0.00

+ \$ 0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$ 0.00

\$ 1,128.33

Debtor 1

James C. Sommar

First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 0.00	\$ 1,128.33
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 200.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$ 200.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 928.33
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 3,362.50	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 2,691.60	\$ 1,082.60
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 6,054.10	\$ 1,082.60
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 6,054.10	\$ 2,010.93
	+	= \$ 8,065.03
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
	11. +	\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.	\$ 8,065.03
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 James C. Sommar
First Name Middle Name Last Name
Debtor 2 Christine M. Sommar
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania (State)
Case number 20-10850-mdc
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
☒ Yes. Does Debtor 2 live in a separate household?
☒ No
☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.
Do not state the dependents' names.

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

Your expenses

4. \$ 3,159.85
4a. \$ 0.00
4b. \$ 133.00
4c. \$ 100.00
4d. \$ 0.00

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

		<u>Your expenses</u>
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$ 200.89
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$ 100.00
6b. Water, sewer, garbage collection	6b.	\$ 100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 214.00
6d. Other. Specify: _____	6d.	\$ 0.00
7. Food and housekeeping supplies	7.	\$ 500.00
8. Childcare and children's education costs	8.	\$ 0.00
9. Clothing, laundry, and dry cleaning	9.	\$ 60.00
10. Personal care products and services	10.	\$ 125.00
11. Medical and dental expenses	11.	\$ 225.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 110.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 125.00
14. Charitable contributions and religious donations	14.	\$ 0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$ 237.33
15b. Health insurance	15b.	\$ 339.20
15c. Vehicle insurance	15c.	\$ 133.00
15d. Other insurance. Specify: _____	15d.	\$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Estimated Tax Payments</u>	16.	\$ 1,000.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$ 0.00
17b. Car payments for Vehicle 2	17b.	\$ 0.00
17c. Other. Specify: _____	17c.	\$ 0.00
17d. Other. Specify: _____	17d.	\$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$ 0.00
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$ 0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .		
20a. Mortgages on other property	20a.	\$ 0.00
20b. Real estate taxes	20b.	\$ 0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$ 0.00
20e. Homeowner's association or condominium dues	20e.	\$ 0.00

Debtor 1 James C. Sommar
First Name Middle Name Last Name

Case number (if known) 20-10850-mdc

21. Other. Specify: _____

21. +\$ 0.00
 +\$ _____
 +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 6,862.27

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$ _____

22c. \$ 6,862.27

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 8,065.03

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 6,862.27

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 1,202.76

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here: